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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. 05587-00358-US	
		First Inventor Michael Haubs et al	
		Title PROCESS AND APPARATUS FOR THE COMBINATORIAL PREPARATION OF MIXTURES, AND USE OF THESE	
		Express Mail Label No. ER 573849397 US	
APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>		ADDRESS TO: MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small>		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
3. <input checked="" type="checkbox"/> Specification [Total Pages 20] <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none">- Descriptive title of the invention- Cross Reference to Related Applications- Statement Regarding Fed sponsored R & D- Reference to sequence listing, a table, or a computer program listing appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure		8. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> <ul style="list-style-type: none">a. <input type="checkbox"/> Computer Readable Form (CRF)b. Specification Sequence Listing on:<ul style="list-style-type: none">i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); orii. <input type="checkbox"/> Paperc. <input type="checkbox"/> Statements verifying identity of above copies	
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 3]			
5. Oath or Declaration [Total Sheets <input]<ul="" style="list-style-type: none; padding-left: 0;" type="checkbox"/> a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small><ul style="list-style-type: none">i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small>		ACCOMPANYING APPLICATIONS PARTS	
6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76			
9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))			
10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of <small>(when there is an assignee) Attorney</small>			
11. <input type="checkbox"/> English Translation Document (if applicable)			
12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations			
13. <input checked="" type="checkbox"/> Preliminary Amendment			
14. <input type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small>			
15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>			
16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.			
17. <input type="checkbox"/> Other: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>			
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: <div style="display: flex; justify-content: space-between; align-items: flex-start;"><div><input type="checkbox"/> Continuation</div><div><input type="checkbox"/> Divisional</div><div><input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: _____</div></div> <div style="display: flex; justify-content: space-between; align-items: flex-start; margin-top: 5px;"><div>Prior application information: Examiner _____</div><div>Art Unit: _____</div></div> <p>For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>			
19. CORRESPONDENCE ADDRESS			
<input checked="" type="checkbox"/> Customer Number: <div style="border: 1px solid black; padding: 2px 20px; display: inline-block;">23416</div> OR <input type="checkbox"/> Correspondence address below			
Name <div style="border: 1px solid black; height: 20px; width: 100%;"></div>			
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City <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		State <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
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Name (Print/Type) Ashley I. Pezzner		Registration No. (Attorney/Agent) 35,646	
Signature <div style="border: 1px solid black; height: 20px; width: 100%; text-align: center;"></div>		Date October 17, 2003	

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16569 U.S. PTO
10/17/03

Use in lieu of PTO/SB/17 (08-03)
(Form updated to reflect FY 2004 fees effective 10/1/03)

FEE TRANSMITTAL for FY 2004				Complete if Known																																																																																																																																																																																			
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The Director is authorized to: (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.																																																																																																																																																																																							
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Name (Print/Type) Ashley I. Pezzner				Registration No. (Attorney/Agent) 35,646																																																																																																																																																																																			
Signature <i>Ashley I. Pezzner</i>				Telephone (302) 658-9141																																																																																																																																																																																			
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294033

Application No. (if known):

Attorney Docket No.: 05587-00358-US

Certificate of Express Mailing Under 37 CFR 1.10

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Alexandria, VA 22313-1450

on October 17, 2003
Date


Signature

J. Lynn Ferry

Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Application Data Sheet
Specification and Claims
Drawings (3 sheets)
First Preliminary Amendment
Utility Transmittal Sheet
Fee Transmittal Sheet
Check for \$770.00
Return Postcard